

118TH CONGRESS
2D SESSION

S. 4684

To ensure affordable health insurance coverage for low-income individuals
in States that have not expanded Medicaid.

IN THE SENATE OF THE UNITED STATES

JULY 11 (legislative day, JULY 10), 2024

Mr. WARNOCK (for himself, Ms. BALDWIN, Mr. CASEY, Ms. WARREN, and Mr.
OSSOFF) introduced the following bill; which was read twice and referred
to the Committee on Finance

A BILL

To ensure affordable health insurance coverage for low-in-
come individuals in States that have not expanded Med-
icaid.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Bridge to Medicaid
5 Act of 2024”.

1 **SEC. 2. ENSURING AFFORDABILITY OF COVERAGE FOR**
2 **CERTAIN LOW-INCOME POPULATIONS.**

3 (a) REDUCING COST SHARING UNDER QUALIFIED
4 HEALTH PLANS.—Section 1402 of the Patient Protection
5 and Affordable Care Act (42 U.S.C. 18071) is amended—

6 (1) in subsection (b)—

7 (A) in paragraph (2), by inserting “(or,
8 with respect to plan years 2026, 2027, and
9 2028, whose household income does not exceed
10 400 percent of the poverty line for a family of
11 the size involved)” before the period; and

12 (B) in the matter following paragraph (2),
13 by adding at the end the following new sen-
14 tence: “In the case of an individual who is de-
15 termined at any point to have a household in-
16 come for 2025 that does not exceed 138 percent
17 of the poverty line for a family of the size in-
18 volved, such individual shall, for each month
19 during such year, be treated as having a house-
20 hold income equal to 100 percent for purposes
21 of applying this section.”; and

22 (2) in subsection (c)—

23 (A) in paragraph (1)(A), in the matter
24 preceding clause (i), by inserting “, with respect
25 to eligible insureds (other than, with respect to
26 plan years 2026, 2027, and 2028, specified en-

rollees (as defined in paragraph (6)(C))),” after
 “first be achieved”;

(B) in paragraph (2), in the matter preceding subparagraph (A), by inserting “with respect to eligible insureds (other than, with respect to plan years 2026, 2027, and 2028, specified enrollees)” after “under the plan”;

(C) in paragraph (3)—

(i) in subparagraph (A), by striking “this subsection” and inserting “paragraph (1) or (2)”; and

(ii) in subparagraph (B), by striking “this section” and inserting “paragraphs (1) and (2)”; and

(D) by adding at the end the following new paragraph:

“(6) SPECIAL RULE FOR SPECIFIED ENROLLEES.—

“(A) IN GENERAL.—The Secretary shall establish procedures under which the issuer of a qualified health plan to which this section applies shall reduce cost-sharing under the plan with respect to months occurring during plan years 2026, 2027, and 2028 for enrollees who are specified enrollees (as defined in subpara-

graph (C)) in a manner sufficient to increase the plan's share of the total allowed costs of benefits provided under the plan to 99 percent of such costs.

“(B) METHODS FOR REDUCING COST SHARING.—

“(i) IN GENERAL.—An issuer of a qualified health plan making reductions under this paragraph shall notify the Secretary of such reductions and the Secretary shall, out of funds made available under clause (ii), make periodic and timely payments to the issuer equal to 12 percent of the total allowed costs of benefits provided under each such plan to specified enrollees during plan years 2026, 2027, and 2028.

“(ii) APPROPRIATION.—In addition to amounts otherwise available, there are appropriated, out of any money in the Treasury not otherwise appropriated, such sums as may be necessary to the Secretary to make payments under clause (i).

“(C) SPECIFIED ENROLLEE DEFINED.—

For purposes of this section, the term ‘specified

1 enrollee’ means, with respect to a plan year, an
 2 eligible insured who is determined at any point
 3 to have a household income for such plan year
 4 that does not exceed 138 percent of the poverty
 5 line for a family of the size involved. Such in-
 6 sured shall be deemed to be a specified enrollee
 7 for each month in such plan year.”.

8 (b) OPEN ENROLLMENTS APPLICABLE TO CERTAIN
 9 LOWER-INCOME POPULATIONS.—Section 1311(c) of the
 10 Patient Protection and Affordable Care Act (42 U.S.C.
 11 18031(c)) is amended—

12 (1) in paragraph (6)—

13 (A) in subparagraph (C), by striking at the
 14 end “and”;

15 (B) in subparagraph (D), by striking the
 16 period at the end and inserting “; and”; and

17 (C) by adding at the end the following new
 18 subparagraph:

19 “(E) with respect to a qualified health plan
 20 with respect to which section 1402 applies, for
 21 months occurring during the period beginning
 22 on January 1, 2025, and ending on December
 23 31, 2028, enrollment periods described in sub-
 24 paragraph (A) of paragraph (8) for individuals

1 described in subparagraph (B) of such para-
 2 graph.”; and

3 (2) by adding at the end the following new
 4 paragraph:

5 “(8) SPECIAL ENROLLMENT PERIOD FOR CER-
 6 TAIN LOW-INCOME POPULATIONS.—

7 “(A) IN GENERAL.—The enrollment period
 8 described in this paragraph is, in the case of an
 9 individual described in subparagraph (B), the
 10 continuous period beginning on the first day
 11 that such individual is so described.

12 “(B) INDIVIDUAL DESCRIBED.—For pur-
 13 poses of subparagraph (A), an individual de-
 14 scribed in this subparagraph is an individual—

15 “(i) with a household income that
 16 does not exceed 138 percent of the poverty
 17 line for a family of the size involved; and

18 “(ii) who is not eligible for minimum
 19 essential coverage (as defined in section
 20 5000A(f) of the Internal Revenue Code of
 21 1986), other than for coverage described in
 22 any of subparagraphs (B) through (E) of
 23 paragraph (1) of such section.”.

24 (c) ADDITIONAL BENEFITS FOR CERTAIN LOW-IN-
 25 COME INDIVIDUALS FOR PLAN YEARS 2027 AND 2028.—

1 Section 1301(a) of the Patient Protection and Affordable
 2 Care Act (42 U.S.C. 18021(a)) is amended—

3 (1) in paragraph (1)—

4 (A) in subparagraph (B), by striking
 5 “and” at the end;

6 (B) in subparagraph (C)(iv), by striking
 7 the period and inserting “; and”; and

8 (C) by adding at the end the following new
 9 subparagraph:

10 “(D) provides, with respect to a plan of-
 11 fered in the silver level of coverage to which sec-
 12 tion 1402 applies during plan year 2027 and
 13 2028, for benefits described in paragraph (5) in
 14 the case of an individual who has a household
 15 income that does not exceed 138 percent of the
 16 poverty line for a family of the size involved,
 17 and who is eligible to receive cost-sharing re-
 18 ductions under section 1402.”; and

19 (2) by adding at the end the following new
 20 paragraph:

21 “(5) ADDITIONAL BENEFITS FOR CERTAIN
 22 LOW-INCOME INDIVIDUALS FOR PLAN YEAR 2027 AND
 23 2028.—

24 “(A) IN GENERAL.—

1 “(i) BENEFITS.—For purposes of
 2 paragraph (1)(D), the benefits described in
 3 this paragraph to be provided by a quali-
 4 fied health plan are benefits consisting
 5 of—

6 “(I) non-emergency medical
 7 transportation services (as described
 8 in section 1902(a)(4) of the Social Se-
 9 curity Act) for which Federal pay-
 10 ments would have been available
 11 under title XIX of the Social Security
 12 Act had such services been furnished
 13 to an individual enrolled under a
 14 State plan (or waiver of such plan)
 15 under such title; and

16 “(II) services described in sub-
 17 section (a)(4)(C) of section 1905 of
 18 such Act for which Federal payments
 19 would have been so available;

20 which are not otherwise provided under
 21 such plan as part of the essential health
 22 benefits package described in section
 23 1302(a).

“(ii) CONDITION ON PROVISION OF
BENEFITS.—Benefits described in this
paragraph shall be provided—

“(I) without any restriction on
the choice of a qualified provider from
whom an individual may receive such
benefits; and

“(II) without any imposition of
cost sharing.

“(B) PAYMENTS FOR ADDITIONAL BENE-
FITS.—

“(i) IN GENERAL.—An issuer of a
qualified health plan making payments for
services described in subparagraph (A) fur-
nished to individuals described in para-
graph (1)(D) during plan year 2027 or
2028 shall notify the Secretary of such
payments and the Secretary shall, out of
funds made available under clause (ii),
make periodic and timely payments to the
issuer equal to payments for such services
so furnished.

“(ii) APPROPRIATION.—In addition to
amounts otherwise available, there is ap-
propriated, out of any money in the Treas-

1 ury not otherwise appropriated, such sums
 2 as may be necessary to the Secretary to
 3 make payments under clause (i).”.

4 (d) EDUCATION AND OUTREACH ACTIVITIES.—

5 (1) IN GENERAL.—Section 1321(c) of the Pa-
 6 tient Protection and Affordable Care Act (42 U.S.C.
 7 18041(c)) is amended by adding at the end the fol-
 8 lowing new paragraph:

9 “(3) OUTREACH AND EDUCATIONAL ACTIVI-
 10 TIES.—

11 “(A) IN GENERAL.—In the case of an Ex-
 12 change established or operated by the Secretary
 13 within a State pursuant to this subsection, the
 14 Secretary shall carry out outreach and edu-
 15 cational activities for purposes of informing in-
 16 dividuals described in section
 17 1902(a)(10)(A)(i)(VIII) of the Social Security
 18 Act who reside in States that have not ex-
 19 pended amounts under a State plan (or waiver
 20 of such plan) under title XIX of such Act for
 21 all such individuals about qualified health plans
 22 offered through the Exchange, including by in-
 23 forming such individuals of the availability of
 24 coverage under such plans and financial assist-
 25 ance for coverage under such plans. Such out-

1 reach and educational activities shall be pro-
2 vided in a manner that is culturally and linguis-
3 tically appropriate to the needs of the popu-
4 lations being served by the Exchange (including
5 hard-to-reach populations, such as racial and
6 sexual minorities, limited English proficient
7 populations, individuals residing in areas where
8 the unemployment rates exceeds the national
9 average unemployment rate, individuals in rural
10 areas, veterans, and young adults).

11 “(B) LIMITATION ON USE OF FUNDS.—
12 Funds appropriated under this paragraph shall
13 not be used to promote any health insurance
14 coverage other than qualified health plans.

15 “(C) FUNDING.—In addition to amounts
16 otherwise available, there is appropriated, out of
17 any money in the Treasury not otherwise ap-
18 propriated, to remain available until expended,
19 \$105,000,000 for fiscal year 2025 to carry out
20 this paragraph, of which—

21 “(i) \$15,000,000 shall be used to
22 carry out this paragraph in fiscal year
23 2025; and

1 “(ii) \$30,000,000 shall be used to
2 carry out this paragraph for each of fiscal
3 years 2026 through 2028.”.

4 (2) NAVIGATOR PROGRAM.—Section 1311(i) of
5 the Patient Protection and Affordable Care Act (42
6 U.S.C. 18031(i)) is amended—

7 (A) in paragraph (1)—

8 (i) by striking “An Exchange” and in-
9 serting the following:

10 “(A) IN GENERAL.—An Exchange”; and

11 (ii) by adding at the end the fol-
12 lowing:

13 “(B) GRANTS FOR ELIGIBLE ENTITIES
14 WITH RESPECT TO CERTAIN STATES.—The Sec-
15 retary shall establish a program to award
16 grants to entities described in paragraph (2) to
17 carry out the duties described in paragraph (3)
18 in one or more States that do not provide under
19 the State plan under title XIX of the Social Se-
20 curity Act (or a waiver of such plan) bench-
21 mark coverage described in section 1937(b)(1)
22 of such Act or benchmark equivalent coverage
23 described in section 1937(b)(2) of such Act to
24 all individuals described in section
25 1902(a)(10)(A)(i)(VIII) of such Act.”; and

1 (B) in paragraph (6)—

2 (i) by striking “Grants under” and in-
3 serting the following:

4 “(A) STATE EXCHANGES.—Except as pro-
5 vided in subparagraph (B), grants under”; and

6 (ii) by adding at the end the following
7 new subparagraph:

8 “(B) FEDERAL EXCHANGES; GRANTS TO
9 ELIGIBLE ENTITIES WITH RESPECT TO CERTAIN
10 STATES.—For purposes of carrying out this
11 subsection, with respect to an Exchange estab-
12 lished and operated by the Secretary within a
13 State pursuant to section 1321(c) and with re-
14 spect to grants under paragraph (1)(B), the
15 Secretary shall obligate not less than
16 \$10,000,000 out of amounts collected through
17 the user fees on participating health insurance
18 issuers pursuant to section 156.50 of title 45,
19 Code of Federal Regulations (or any successor
20 regulations) for fiscal year 2026, and not less
21 than \$20,000,000 for each of fiscal years 2027
22 and 2028. Such amount so obligated for a fiscal
23 year shall remain available until expended.”.

24 (e) FUNDING.—In addition to amounts otherwise
25 available, there is appropriated to the Secretary of Health

1 and Human Services for fiscal year 2025, out of any
 2 money in the Treasury not otherwise appropriated,
 3 \$65,000,000, to remain available until expended, for pur-
 4 poses of carrying out the provisions of, and the amend-
 5 ments made by, this section.

6 **SEC. 3. TEMPORARY EXPANSION OF HEALTH INSURANCE**
 7 **PREMIUM TAX CREDITS FOR CERTAIN LOW-**
 8 **INCOME POPULATIONS.**

9 (a) IN GENERAL.—Section 36B of the Internal Rev-
 10 enue Code of 1986 is amended by redesignating subsection
 11 (h) as subsection (i) and by inserting after subsection (g)
 12 the following new subsection:

13 “(h) CERTAIN TEMPORARY RULES BEGINNING IN
 14 2026.—With respect to any taxable year beginning after
 15 December 31, 2025, and before January 1, 2029—

16 “(1) ELIGIBILITY FOR CREDIT NOT LIMITED
 17 BASED ON INCOME.—Subsection (c)(1)(A) shall be
 18 applied without regard to ‘equals or exceeds 100
 19 percent but’.

20 “(2) CREDIT ALLOWED TO CERTAIN LOW-IN-
 21 COME EMPLOYEES OFFERED EMPLOYER-PROVIDED
 22 COVERAGE.—In the case of an individual whose
 23 household income does not exceed 138 percent of the
 24 poverty line for a family of the size involved, clause
 25 (i) of subsection (c)(2)(C) shall be applied (including

1 in the case of any individual described in the last
 2 sentence of such clause) without regard to subclause
 3 (II) thereof.

4 “(3) CREDIT ALLOWED TO CERTAIN LOW-IN-
 5 COME EMPLOYEES OFFERED QUALIFIED SMALL EM-
 6 PLOYER HEALTH REIMBURSEMENT ARRANGE-
 7 MENTS.—A qualified small employer health reim-
 8 bursement arrangement shall not be treated as con-
 9 stituting affordable coverage for an employee (or any
 10 spouse or dependent of such employee) for any
 11 months of a taxable year if the employee’s household
 12 income for such taxable year does not exceed 138
 13 percent of the poverty line for a family of the size
 14 involved.

15 “(4) LIMITATIONS ON RECAPTURE.—

16 “(A) IN GENERAL.—In the case of a tax-
 17 payer whose household income is less than 200
 18 percent of the poverty line for the size of the
 19 family involved for the taxable year, the amount
 20 of the increase under subsection (f)(2)(A) shall
 21 in no event exceed \$300 (one-half of such
 22 amount in the case of a taxpayer whose tax is
 23 determined under section 1(c) for the taxable
 24 year).

“(B) LIMITATION ON INCREASE FOR CERTAIN NON-FILERS.—In the case of any taxpayer who would not be required to file a return of tax for the taxable year but for any requirement to reconcile advance credit payments under subsection (f), if an Exchange established under title I of the Patient Protection and Affordable Care Act has determined that—

“(i) such taxpayer is eligible for advance payments under section 1412 of such Act for any portion of such taxable year, and

“(ii) such taxpayer’s household income for such taxable year is projected not to exceed 138 percent of the poverty line for a family of the size involved, subsection (f)(2)(A) shall not apply to such taxpayer for such taxable year and such taxpayer shall not be required to file such return of tax.

“(C) INFORMATION PROVIDED BY EXCHANGE.—The information required to be provided by an Exchange to the Secretary and to the taxpayer under subsection (f)(3) shall include such information as is necessary to determine whether such Exchange has made the de-

1 terminations described in clauses (i) and (ii) of
 2 subparagraph (B) with respect to such tax-
 3 payer.”.

4 (b) EMPLOYER SHARED RESPONSIBILITY PROVISION
 5 NOT APPLICABLE WITH RESPECT TO CERTAIN LOW-IN-
 6 COME TAXPAYERS RECEIVING PREMIUM ASSISTANCE.—
 7 Section 4980H(c)(3) of the Internal Revenue Code of
 8 1986 is amended to read as follows:

9 “(3) APPLICABLE PREMIUM TAX CREDIT AND
 10 COST-SHARING REDUCTION.—

11 “(A) IN GENERAL.—The term ‘applicable
 12 premium tax credit and cost-sharing reduction’
 13 means—

14 “(i) any premium tax credit allowed
 15 under section 36B,

16 “(ii) any cost-sharing reduction under
 17 section 1402 of the Patient Protection and
 18 Affordable Care Act, and

19 “(iii) any advance payment of such
 20 credit or reduction under section 1412 of
 21 such Act.

22 “(B) EXCEPTION WITH RESPECT TO CER-
 23 TAIN LOW-INCOME TAXPAYERS.—Such term
 24 shall not include any premium tax credit, cost-
 25 sharing reduction, or advance payment other-

1 wise described in subparagraph (A) if such
 2 credit, reduction, or payment is allowed or paid
 3 for a taxable year of an employee (beginning
 4 after December 31, 2025, and before January
 5 1, 2029) with respect to which—

6 “(i) an Exchange established under
 7 title I of the Patient Protection and Af-
 8 fordable Care Act has determined that
 9 such employee’s household income for such
 10 taxable year is projected to not exceed 138
 11 percent of the poverty line for a family of
 12 the size involved, or

13 “(ii) such employee’s household in-
 14 come for such taxable year does not exceed
 15 138 percent of the poverty line for a family
 16 of the size involved.”.

17 (c) EFFECTIVE DATE.—The amendments made by
 18 this section shall apply to taxable years beginning after
 19 December 31, 2025.

20 **SEC. 4. FURTHER INCREASE IN FMAP FOR MEDICAL AS-**
 21 **SISTANCE FOR NEWLY ELIGIBLE MANDA-**
 22 **TORY INDIVIDUALS.**

23 Section 1905(y)(1) of the Social Security Act (42
 24 U.S.C. 1396d(y)(1)) is amended—

1 (1) in subparagraph (D), by striking at the end
2 “and”;

3 (2) in subparagraph (E), by striking “2020 and
4 each year thereafter.” and inserting “2020, 2021,
5 2022, 2023, 2024, and 2025;”; and

6 (3) by adding at the end the following new sub-
7 paragraphs:

8 “(F) 93 percent for calendar quarters in
9 2026, 2027, and 2028; and

10 “(G) 90 percent for calendar quarters in
11 2029 and each year thereafter.”.

○